

MAINE PUBLIC HEALTH ALERT NETWORK SYSTEM



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****ADVISORY – Important Information****

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SUBJECT: **REVISED** Widespread Influenza Activity in Maine

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PRIORITY: Please Review

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Maine Center for Disease Control and Prevention (Maine CDC)
(Formerly Bureau of Health)

Widespread Influenza Activity in Maine

Summary: In February, influenza activity has become widespread in Maine, with all three of the major seasonal influenza variants circulating. Outbreaks of influenza are occurring in schools and in long term care facilities across the state. The influenza vaccine is a good match for both influenza A strains, and matches approximately 30% of the influenza B strains currently circulating. Influenza vaccination is still strongly encouraged, especially to protect those persons at risk of more severe disease. Interim recommendations for chemoprophylaxis and treatment of influenza have been issued in response to the high resistance of influenza A H1N1 strains to oseltamivir (Tamiflu) in national studies.

Background: Active surveillance for influenza activity is conducted year-round in Maine as part of a national influenza surveillance system. Surveillance activities include monitoring levels of influenza-like illness at outpatient care sites, tracking influenza and pneumonia hospitalizations and deaths, identification of influenza and other respiratory viral isolates at major clinical laboratories in Maine, and typing and sub-typing of influenza isolates at the Maine Health and Environmental Testing Laboratory. Weekly reports are published during the season, and are available at: http://www.maine.gov/dhhs/boh/influenza_surveillance_weekly_updates.htm

Influenza in Maine: During this season, influenza was first detected in Maine in December, with levels of activity observed to be sporadic or local through the middle of January. For the week ending February 14th, influenza has become widespread and all three subtypes of influenza have been identified in the state. Since January, outbreaks of influenza and influenza-like illness were reported from five long term care facilities and eleven schools (nine confirmed to be influenza A, one confirmed to be influenza B, and one with both influenza A and B) in Eastern, Western, Midcoast, Cumberland, York, and Penquis regions of the state. Maine's Health and Environmental Testing Laboratory (HETL) subtypes influenza isolates. During this season HETL, has subtyped 21 isolates; 18 influenza A H1, one influenza A H3, and two influenza Bs.

National Influenza Activity: Influenza activity has increased rapidly since early January and became widespread across the east coast and in the New England area by the week ending February 7th. Both major subtypes of influenza A (H3N2 and H1N1), and influenza B are circulating widely. Antigenic characterization of circulating viruses at the federal CDC indicates that there is a good vaccine match for both of the influenza A circulating subtypes (H1N1, and H3N2). Of the two influenza B lineages currently circulating only one has a corresponding antigen in this season's vaccine, which indicates that protective efficacy for influenza B is probably decreased.

Antiviral Resistance: Testing for antiviral resistance at the federal CDC has identified high levels of resistance to oseltamivir (98.3%) in this year's isolates, all occurring in one subtype (influenza A {H1N1}). Less than 1% of these (influenza A {H1N1}) isolates are resistant to the adamantanes (rimantadine and amantadine). All tested viruses retained their sensitivity to zanamivir. The federal CDC is recommending tailored therapy based on what strains are currently circulating in the area. For influenza A strains, Maine currently falls under the "influenza A H1N1 or unknown" category, and the antiviral recommendation is either zanamivir (Relenza), or combination therapy with oseltamivir (Tamiflu) and rimantadine. The CDC

Antiviral Guidance Table can be found on Maine's influenza website at <http://www.maine.gov/dhhs/boh/documents/Antiviral%20Guidance%20Table12.19.08.doc>

Recommendations: Medical providers should be aware that influenza is circulating widely in Maine and review the recommendations for influenza prevention and control for 2008-09 published by the federal CDC (<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr57e717a1.htm>)

- Influenza vaccination is still strongly encouraged for persons who wish to reduce their risk of becoming ill with or transmitting influenza, and especially for all children 6 months – 18 years, adults aged > 50 years, women who will be pregnant during the influenza season, persons with health conditions which place them at risk of influenza complications, residents of long term care facilities, health care workers, and household contacts of persons at risk of complications.
- The federal CDC has issued interim guidelines for the treatment and prophylaxis of influenza with antivirals. The full guidelines can be found at <http://www2a.cdc.gov/HAN/ArchiveSys/ViewMsgV.asp?AlertNum=00279>
- Infection control practices such as good hand hygiene, respiratory etiquette (coughing into elbow), and staying home when ill should be promoted.
- Influenza-related deaths in persons aged less than 18 years and outbreaks of influenza-like illnesses in long term care facilities should be immediately reported to Maine CDC at 1-800-821-5821.